

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

19774731

**Application or Docket Number** 

|   |  |   | 09779731        |                      |                                  |                  |          |                    |                 |                  |                  |                            |                        |
|---|--|---|-----------------|----------------------|----------------------------------|------------------|----------|--------------------|-----------------|------------------|------------------|----------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                 |                      |                                  |                  | -, -     | SMALL ENTITY TYPE  |                 |                  | OR               | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS  |  |   | 19              |                      |                                  |                  |          | RATE               | FE              | E                |                  | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED    |                      | NUMBER EXTRA                     |                  | В        | ASIC FEE           | 355             | .00              | OR               | BASIC FEE                  | ·710.00                |
| TOTAL CHARGEABLE CLAIMS   |  |   | 19 minus 20=    |                      | . 0                              |                  |          | X\$ 9=             |                 |                  | OR               | X\$18=                     | <del></del>            |
| INDEPENDENT CLAIMS  |  |   | 5 min           | us 3 =               | 2                                |                  |          | X40=               |                 |                  | OR               | X80=                       | 160                    |
| MU  | LTIPLE DEPENI                                  | DENT CLAIM PI   | RESENT          |                      |                                  |                  |          | +135=              |                 | T                | OR               | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                 |                      |                                  |                  | _        | TOTAL              |                 |                  | OR               | TOTAL                      | 87D                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |                 |                      |                                  | ;                | SMALL E  | NTN                | ΤΥ              | OR               | OTHER<br>SMALL I |                            |                        |
| AMENDMENT A   |  | CLAIMS REMAINING AFTER AMENDMENT                                |                 | HIGH<br>NUM<br>PREVI |                                  | PRESENT<br>EXTRA |          | RATE               | AD<br>TIO<br>FE |                  |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                   |                                  | = .              |          | X\$ 9=             |                 |                  | OR               | X\$18=                     |                        |
|   | Independent                                    | *   | Minus           | ***                  |                                  | =                |          | X40=               |                 |                  | OR               | X80=                       |                        |
| L   | FIRST PRESE                                    | NTATION OF M  | ULTIPLE DEF     | PENDEN               | T CLAIM                          |                  |          | +135=              |                 |                  | OR               | +270=                      |                        |
|   |  |   |                 |                      |                                  |                  | L.<br>Al | TOTAL<br>DDIT. FEE |                 |                  | OR               | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                 |                      |                                  |                  |          |                    |                 |                  |                  |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                 | NUM<br>PREV          | HEST<br>MBER<br>IOUSLY<br>D FOR  | PRESENT<br>EXTRA |          | RATE               | TIO             | DI-<br>NAL<br>EE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                   |                                  | =                |          | X\$ 9=             |                 |                  | OR               | X\$18=                     | ·                      |
|   | Independent                                    | *   | Minus           | ***                  |                                  | = -              |          | X40=               |                 |                  | OR               | X80=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |                      |                                  |                  | <b>,</b> | +135=              |                 |                  | OR               | +270=                      |                        |
|   |  |   |                 |                      |                                  |                  | L        | TOTAL<br>DDIT. FEE |                 |                  | OR               | TOTAL<br>ADDIT. FEE        |                        |
|   |  | (Column 1)  | - <u>-</u>      |                      | ımn 2)                           | (Column 3)       |          |                    |                 |                  | _                |                            |                        |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT                                |                 | NUI<br>PREV          | HEST<br>MBER<br>YIOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE               | TIC             | DI-<br>NAL<br>EE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                   |                                  | =                | ] [      | X\$ 9=             |                 |                  | OR               | X\$18=                     |                        |
|   | Independent                                    |   | Minus           | ***                  | IT OL AIR                        | -                | ┨╏       | X40=               |                 |                  | OR               | X80=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |                      |                                  |                  |          | +135=              |                 |                  | OR               |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  AD |  |   |                 |                      |                                  |                  |          |                    | $\vdash$        |                  | OR               | TOTAL                      |                        |
| -   | *If the "Highest No                            | imber Previously in<br>umber Previously in<br>mber Previously P | Paid For" IN TH | IS SPACI             | E is less th                     | an 3. enter "3." |          | DDIT. FEE          | prop            | riate b          | -1               | AUDII. FEI                 | - <b>-</b>             |